STATE OF MAINE



COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

Mail: 135 State House Station, Augusta, Maine 04333-0135 Office: 242 State Street, Augusta, Maine

Tel: (207)287-4179 FAX: 287-6775

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STATEMENT OF SOURCES OF INCOME 1 M.R.S.A. §§ 1016-A et seg.

COVERING THE CALENDAR YEAR JANUARY 1, 2006 THROUGH DECEMBER 31, 2006

FULL NAME:	Emily Ann Cain	Please check the appropriate box and fill in the District number.
MAILING ADDRESS:	103 Forest Are	Member of the Senate, District
CITY: _ ZIP CODE:	<u> </u>	Member of the Senate, District
PHONE NUMBER:	-201-866-3753	Member of the House, District
	CENIED AT INSTRUCTOR	ONE

1. Please file this statement with the Clerk of the House or the Secretary of the Senate by:

5:00 p.m. on February 15, 2007.

- The report covers you, your spouse, and your dependent children.
- Report only specific sources of income. Dollar amounts need not be listed.
- Campaign contributions duly recorded as required by law need not be reported in this statement.

PLEASE KEEP A COPY OF THIS STATEMENT BOD

- Attach additional sheets if needed. Label attachments with your name, address, and the date.
- Please sign on Page 4.
- The completed statements will be posted as a 'pdf' on the Commission's website.
- State law (1 M.R.S.A. § 1018) requires Legislators to file an updated statement with the Commission within 30 days of any change to the information relating to the preceding year. Additionally, the law (1 M.R.S.A. § 1016-B (2)) requires Legislators to make a supplementary statement to the Commission of any reportable liability within 30 days after it is incurred.

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Disclosure statements are made available to members of the public upon request.

Thank you for your cooperation.

PART I. INCOME DERIVED FROM EMPLOYMENT BY ANOTHER. Name each employer from whom you received compensation of \$1,000 or more. Specify also the principal type of economic activity of each employer.

Name of Employer	Address	Principal Type of Economic Activity of Employer
Univ. of MAINE Homors	College, ColuNHall, Open, 044	13 Education
	9	
	1,000	
ART II. INCOME DERIVED FRO	OM SELF-EMPLOYMENT. (For Legisla ur business, if any, and list the major areas	
of Business Entity	r Areas of Economic Activity (self)	Major Areas of Economic Activity (partnership, association or similar business entity)
•	•	Nentral, concloninum
		•
\$1,000, whichever is greater, and	wed from self-employment that represents a specify the principal type of economic activ	vity of the entity or person from whom you
Name each source of income deri \$1,000, whichever is greater, and derived such income. If this form	ved from self-employment that represents n	vity of the entity or person from whom you an established code of professional ethics.
Name each source of income deri \$1,000, whichever is greater, and derived such income. If this form specify only the principal type of	ived from self-employment that represents n specify the principal type of economic activ of disclosure is prohibited by law, rule, or economic activity of the entity or person fro	wity of the entity or person from whom you an established code of professional ethics, on whom the income was derived. Principal Type of Economic Activity of Entity or Person Who Is the
Name each source of income deri \$1,000, whichever is greater, and derived such income. If this form specify only the principal type of	ived from self-employment that represents n specify the principal type of economic activ of disclosure is prohibited by law, rule, or economic activity of the entity or person fro	wity of the entity or person from whom you an established code of professional ethics, on whom the income was derived. Principal Type of Economic Activity of Entity or Person Who Is the
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Name each source of income derir \$1,000, whichever is greater, and derived such income. If this form specify only the principal type of Name of Source Name of Source ART III. MAJOR AREAS OF PRACTICE. If associated with a law firm, I	ved from self-employment that represents me specify the principal type of economic activated of disclosure is prohibited by law, rule, or economic activity of the entity or person from Address Address ACTICE. (For Legislators who are attorned is the major areas of practice of your firm. Major Areas of Practice	wity of the entity or person from whom you an established code of professional ethics, on whom the income was derived. Principal Type of Economic Activity of Entity or Person Who Is the Source of Income
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PART IV. OTHER SOURCES OF INCOME. Name each source of income of \$1,000 or more not listed in Parts I, II, or III of this form. Do not include gifts. If none, so state.

Name of Source	<u>Address</u>	Kind of Income
1. NON		ь
3		
4.		
3		
/		
	ng the reporting period, and list the majo	e names of creditors for any unsecured loans or areas of economic activity of each creditor.
	•	Principal Type of Economic
Name of Creditor	Address of Creditor	Activity of Creditor
. rushe		
··		- William I I I I I I I I I I I I I I I I I I I
3		
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PART VI. DISCLOSURE OF GI	TS. Name the specific source of eac	h gift of more than \$300. Include gifts with
aggregate value of more than \$300 from		
. none	3	
/		
PART VII. DISCLOSURE OF He elated to your official duties. If none,	ONORARIA. List the source of any	honoraria accepted for appearances or speed
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none	3,	
	4	
117 117 117 117	T MARK TO MARKET	
ART VIII. REPRESENTATION ou represented or assisted others for c	BEFORE STATE AGENCIES. Ider ompensation of any amount. If none, so	ntify each executive branch agency before who
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V 00 - 0	4.	
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PART X. INCOME RECEP	VED BY MEMBERS OF IMM	IEDIĄTE FAMILY.	
child(ren) during the reporting	ity representing each source of i period and the kind of income re I (D) beside sources of income re	ncome of \$1,000 or more received by your epresented. Do not include gifts. Indicate eceived by dependent(s).	spouse or dependent (S) beside sources of
Type of Economic Activity Representing Each Source Income Received		<u>Kind of Income</u>	
1. Education - Cer	muty College	Englism	ul
2. Poal Estrate /	Jupuly Develop	ut Euploys	ust
3			
4			
			, ** Main M.S. A. III
•	********************	***********	
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appears that a Legislator leattorney General. If the obstatement or has willfully interest on every question branch of the Legislature, who willfully fails to file a	has willfully filed a false st Commission determines that filed a false statement, the and shall be precluded fro and shall not attempt to in	Class E crime. If the Commission catement, it shall refer its findings of at a Legislator has willfully failed to Legislator shall be presumed to have my coting on any question in committuence the outcome of any question of a social penalty not to exceed \$ 1.010.	f fact to the ofile a required we a conflict of ittee or in either or A Legislator

Signature/